2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724384

Entity Name: GLEN OAKS RIDGE OWNERS ASSOCIATION, INC.

FILED
Apr 12, 2016
Secretary of State
CC5979256877

Current Principal Place of Business:

C/O CASEY CONDO MANAGEMENT 4370 S. TAMIAMI TRAIL, SUITE 102 SARASOTA, FL 34231

Current Mailing Address:

C/O CASEY CONDO MANAGEMENT 4370 S. TAMIAMI TRAIL, SUITE 102 SARASOTA, FL 34231 US

FEI Number: 59-1690454 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

4370 S. TAMIAMI TRAIL, STE 102

BECKER & POLIAKOFF, P.A. 6230 UNIVERSITY PARKWAY - STE.204 SARASOTA, FL 34240 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PRESIDENT Title SECRETARY

Name RUSSELL. WILLIAM M Name PURSLEY, LINDA

Address C/O CASEY MANAGEMENT Address C/O CASEY MANAGEMENT

4370 S. TAMIAMI TRAIL, STE 102

City-State-Zip: SARASOTA FL 34231 City-State-Zip: SARASOTA FL 34231

Title AS Title TRESURER

Name SPENCE, BRIDGET Name KINNEY, DIANNE E

Address CASEY MANAGEMENT Address C/O CASEY CONDO MANAGEMENT

4370 S. TAMIAMI TRAIL, STE 102 4370 S. TAMIAMI TRAIL, SUITE 102

City-State-Zip: SARASOTA FL 34231 City-State-Zip: SARASOTA FL 34231

Title DIRECTOR Title DIRECTOR

Name MARINELLI, GENE Name HACKETT, TOM

Address C/O CASEY CONDO MANAGEMENT Address C/O CASEY CONDO MANAGEMENT

4370 S. TAMIAMI TRAIL, SUITE 102 4370 S. TAMIAMI TRAIL, SUITE 102

City-State-Zip: SARASOTA FL 34231 City-State-Zip: SARASOTA FL 34231

Title DIRECTOR Title DIRECTOR

Name SLOMAN, SALLY Name GOEHRING, CURT

Address C/O CASEY CONDO MANAGEMENT Address C/O CASEY CONDO MANAGEMENT

4370 S. TAMIAMI TRAIL, SUITE 102 4370 S. TAMIAMI TR #102

City-State-Zip: SARASOTA FL 34231 City-State-Zip: SARASOTA FL 34231

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DIANNE E. KINNEY TREASURER 04/12/2016